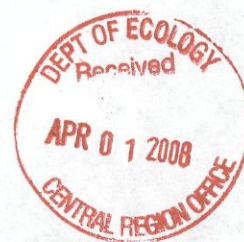




STATE OF WASHINGTON
APPLICATION TO ENTER A WATER RIGHT INTO
THE TRUST WATER RIGHT PROGRAM



NOTE: THIS FORM IS ONLY TO BE USED FOR THE
ACQUISITION OF WATER INTO THE TRUST WATER RIGHT PROGRAM

(Check all that apply.)

- ☐ Lease
☐ Purchase
☒ Donation
☐ Other

Explain: _____ Donation to prevent relinquishment _____

IF FOR SEASONAL OR TEMPORARY, START DATE 04/1/2008
END DATE 10/15/2008

FOR OFFICE USE ONLY

FILE No. C64-23006C01 WRIA 45

DATE ACCEPTED 04/02/08 BY [Signature]

FEE \$ [Signature] REC'D 04/01/2008

CHECK No. [Signature]

SEPA: ☒ Exempt ☐ Not exempt

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

1. Applicant Information:

| | | |
|--|-----------------------------|------------------------|
| APPLICANT/BUSINESS NAME William Pat Burnett | PHONE NO. (509) 548-7588 | FAX NO. () |
| ADDRESS 12002 Burnett Road | | |
| CITY Leavenworth | STATE WA | ZIP CODE 98826-8746 |
| CONTACT NAME (IF DIFFERENT FROM ABOVE) Lisa Pelly – Washington Rivers Conservancy | PHONE NO. (509)888-0970 | FAX NO. () |
| ADDRESS 103 Palouse Street, Suite 14 | | |
| CITY Wenatchee | STATE WA | ZIP CODE 98801-2251 |

2. Water Right Information:

| | |
|---|--------------------------------|
| WATER RIGHT OR CLAIM NUMBER Water Right Claim No. G4-23006 | RECORDED NAME(S) Earl Burts |
| DO YOU OWN THE RIGHT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS: | |
| HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | |
| ARE WATER DIVERSIONS/WITHDRAWALS OF THIS WATER RIGHT METERED OR MEASURED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | |
| IMPORTANT! PROVIDE INFORMATION SHOWING THE EXTENT OF WATER USE FOR EACH OF THE LAST FIVE YEARS | |

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

64-23006CWR15 Burts

FOR OFFICE USE ONLY

WATER RIGHT NO. _____ FILE (contract) NO. _____

3. How is Water to be Made Available for Trust?

| | |
|---|---|
| <input type="checkbox"/> Alteration in method of diversion | <input type="checkbox"/> Alteration in water use/ irrigated acreage |
| <input type="checkbox"/> Alteration in method of delivery/conveyance | <input type="checkbox"/> Nonuse of one or more points of diversion |
| <input type="checkbox"/> Alteration in method of water application | <input checked="" type="checkbox"/> Nonuse of all or a portion of the named water right |
| <input type="checkbox"/> Alteration in type of crop | <input checked="" type="checkbox"/> Other, Explain below: |
| Name of funding source(s): Not applicable. Water right donation is for mitigation purposes. | |

WATER RIGHT DESCRIPTION *

4. Point(s) of Diversion/Withdrawal:

A. Existing

| SOURCE | NO. | ¼ | ¼ | SEC. | TWP. | RGE. | PARCEL # | WELL TAG # |
|-------------|-----|----|----|------|------|------|----------|------------|
| Groundwater | | SW | SW | 23 | 23 N | 19E | | |
| | | | | | | | | |
| | | | | | | | | |

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

5. Purpose of Use:

A. Existing Use of the Water Right

| PURPOSE OF USE | GPM or CFS | ACRE-FT/YR | PERIOD OF USE |
|-------------------------|------------|------------|---|
| Irrigation and Domestic | 40GPM | 16 | April 1 to October 15 see description below |

B. Proposed Purpose of the Trust Water Right:

| DESCRIBE THE PURPOSE(S) OF USE DURING THE PERIOD OF TRUST: | |
|--|--------------|
| PURPOSE OF USE | ACRE-FEET/YR |
| Instream Flow | 16 |

6. Place of Use:

A. Existing:

| | | | | | | | |
|---|----|------|------|------|--------|----------|------------|
| LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED: | | | | | | | |
| A tract of land situated in the SW1/4 of S/W1/4 of Sec 23, T. 23N., R19 E.W.M., described as follows: Beginning at the NE corner of the SW1/4SW1/4 of Sec 23, T. 23N., R19 E.W.M.; thence S 330 feet; thence W 310 feet; thence S 240 feet; thence W 300 feet; thence S 435 feet, thence E 310 feet, thence N 670 feet to the point of the beginning. | | | | | | | |
| | | | | | | | |
| ¼ | ¼ | SEC. | TWP. | RGE. | COUNTY | PARCEL # | # OF ACRES |
| SW | SW | SE | 23 | 23N | Chelan | | 3 |
| DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? * YES NO – IF NO, PROVIDE OWNER(S) NAME: | | | | | | | |
| | | | | | | | |

6. Place of Use (continued)

B. Proposed:

IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED

7. Remarks and Other Relevant Information:

The purpose of use for this water is split between irrigation and domestic. The irrigation is for 12 acre feet from April 1st to October 15th, and the domestic portion is for 4 acre feet per year to be used year round.

This Trust Water Right Application seeks a transfer of a portion of the water right to be used exclusively for instream flows for fish maintenance and enhancement, recreational uses and preservation of environmental and aesthetic values as allowed under RCW Chapters 90.03, 90.42 and 90.58.

Since this transfer is for non-consumptive purpose and would provide a substantial benefit to the natural environment, we request expedited processing under WAC 173-152-050(2)(b) and (3)(a).

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

8. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I hereby grant staff from the Department of Ecology access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

| | |
|---------------------------|------------------|
| <u>Bobby John Burnett</u> | <u>3-21-2008</u> |
| <u>William P Burnett</u> | <u>3/21/2008</u> |
| (Applicant) | (Date) |
| <u>Bobby John Burnett</u> | <u>3-21-2008</u> |
| <u>William P Burnett</u> | <u>3/21/2008</u> |
| (Water Right Holder) | (Date) |

(Land Owner(s) of Existing Place of Use)

(Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- ☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE
- ☐ OTHER/EXPLANATION: _____

STAFF: _____ DATE: ____/____/____

ATTACHMENT FOR APPLICATION TO ENTER A WATER RIGHT INTO THE TRUST WATER RIGHT PROGRAM

Point(s) of Diversion/Withdrawal - ☐ Existing ☐ Proposed:

| SOURCE | NO. | ¼ | ¼ | SEC. | TWP. | RGE. | PARCEL # | WELL TAG # |
|-------------|-----|----|----|------|------|------|----------|------------|
| Groundwater | | SW | SW | 23 | 23 N | 19E | | |
| | | | | | | | | |
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| | | | | | | | | |

B. Proposed Purpose of the Trust Water Right

| DESCRIBE THE PURPOSE(S) OF USE DURING THE PERIOD OF TRUST: | |
|--|--------------|
| PURPOSE OF USE | ACRE-FEET/YR |
| Instream Flow | 16 |
| | |
| | |
| | |
| | |

Place of Use - ☐ Existing:

| LEGAL DESCRIPTION OF LANDS | | | | | | | |
|--|----|------|------|------|--------|----------|------------|
| A tract of land situated in the SW1/4 of S/W1/4 of Sec 23, T. 23N., R19 E.W.M., described as follows: Beginning at the NE corner of the SW1/4SW1/4 of Sec 23, T. 23N., R19 E.W.M.; thence S 330 feet; thence W 310 feet; thence S 240 feet; thence W 300 feet; thence S 435 feet, thence E 310 feet, thence N 670 feet to the point of the beginning. | | | | | | | |
| ¼ | ¼ | SEC. | TWP. | RGE. | COUNTY | PARCEL # | # OF ACRES |
| SW | SW | SE | 23 | 23N | Chelan | | 3 |
| DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? × YES NO – IF NO, PROVIDE OWNER(S) NAME: | | | | | | | |